

NOV 29 2005

PTO/SB/21 (09-04)


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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/652,350	
	Filing Date	August 29, 2003	
	First Named Inventor	John P. Barnak	
	Art Unit	2818	
	Examiner Name	Dao H. Nguyen	
Total Number of Pages in This Submission (not including this page)	7	Attorney Docket Number	42P15042

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Blakely, Sokoloff, Taylor & Zafman LLP		
Signature			
Printed name	Michael J. Mallie		
Date	November 29, 2005	Reg. No.	36,591

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FACSIMILE TRANSMITTAL SHEET

Deliver to: Examiner Dao H. Nguyen, Art Unit 2818
Firm Name: U.S. Patent & Trademark Office
Fax Number: 571-273-8300
From: Michael J. Mallie Operator: Anne Collette
Date: November 29, 2005
App. No.: 10/652,350
No. of pages: 9 (Including cover sheet)
Client/Matter: 42P15042 Docket Date: 11/29/2005 Atty: EMM

Dear Examiner:

Please find the following document(s) attached:

- 1) Transmittal Form (1 page)
- 2) Fee Transmittal (1 page)
- 3) Response to Office Action (6 pages)

Thank you.

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NOV 29 2005

PTO/SB/17 (12-04)

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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**FEE TRANSMITTAL**
For FY 2005☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) 450.00**Complete If Known**

Application Number	10/652,350
Filing Date	August 29, 2003
First Named Inventor	John P. Barnak
Examiner Name	Dao H. Nguyen
Art Unit	2818
Attorney Docket No.	42P15042

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims - 20 or HP = _____ x _____ = _____ **Fee Paid (\$)**

HP = highest number of total claims paid for, if greater than 20

Indep. Claims - 3 or HP = _____ x _____ = _____ **Fee Paid (\$)**

HP = highest number of independent claims paid for, if greater than 3

Multiple Dependent Claims

Fee (\$) _____ Fee Paid (\$) _____

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____ - 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____				

4. OTHER FEE(S)

1) Extension for response within second month (Fee Code 1252)

Fees Paid (\$)
450.00

SUBMITTED BY

Signature	Registration No. (Attorney/Agent) 36,591	Telephone 408-420-8300
Name (Print/Type) Michael J. Mallie		Date November 29, 2005

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11/30/2005 CNGUYEN2 00000007450.00 DA
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NOV 29 2005

Attorney's Docket No.: 42P15042

Patent

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application for:

John P. Barnak et al.

Application No.: 10/652,350

Filed: August 29, 2003

For: An Enhanced Gate Structure

Examiner: Nguyen, Dao H

Art Group: 2818

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE

Sir:

In response to the Office Action mailed June 29, 2005, please consider the following remarks:

Amendments to the claims begin on page 2 of this paper.

Remarks begin on page 5 of this paper.

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Anne Collette

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